Lumpkin County Fire/EMS Application for Special Event Permit

| Special Event Permit No: | Fee: <u>\$100.00</u> | 1.78 |
|--|--------------------------------------|----------------|
| Location of proposed events | | EM |
| Location of proposed event: | | "HLONE |
| Proposed dates of event from: (Include set-up and strike days) | to | |
| Proposed hours of operation from: | to | |
| Describe proposed event. Please specify all | planned activities and structures | s to be used. |
| Please provide a drawing of the propos and activities. You may draw the ever application. Will a tent or other structure be erected will electricity be needed on site? | nt in the space provided on on site? | |
| Will a fence be constructed? | | es 🗆 / No 🗖 |
| Will food or drink be available on site? | | es 🗆 / No 🗖 |
| Will a band or amplified sound be on site | | es 🗖 / No 🗖 |
| Will portable toilet facilities be on site? | | es 🗆 / No 🗅 |
| Is this site located at an existing shopping other developed parking lot? | • | es □ /No □ |
| Is this site paved? | | es 🗆 / No 🗖 |
| Is the paving striped for parking? | | es 🗆 / No 🗖 |
| Does this site have a curb and gutter? | | es 🗖 / No 🗖 |
| Does this site have an access driveway? | ? Yo | es 🗆 / No 🗅 |
| APPLICANT: | | |
| Name | | |
| Address | | |
| Telephone No.: | Fax No.: | |
| PROPERTY OWNER: Name | | |
| Address | | |
| Telephone No.: | Fax No.: | |
| IF APPLICANT IS DIFFERENT FROM PROPAUTHORIZATION LETTER. | ERTY OWNER, PLEASE SUBMIT | ATTACHED OWNER |
| Applicant's Signature | Date_ | |

OWNER AUTHORIZATION LETTER (SPECIAL EVENT PERMITS ONLY)

| SPECIAL EVENT PERMIT | NO.: | | |
|---|---|-----------------------------------|--|
| Property Address: | | | |
| • • | e owner of record, then a letter oust be submitted. Note: All own e land. | • | |
| property described and a | notify and verify that I/we amattached hereto and do hereby arest in the above referenced app | authorize the applicant to file | |
| OWNER(S) OF RECORD (I | nclude extra sheets if necessary): | | |
| Printed Name | Signature | Date | |
| Printed Name | Signature | Date | |
| I certify that I am the appl all respects true and corre | icant and that the information colect. | ntained in this application is in | |
| APPLICANT / APPLICANT' | S REPRESENTATIVE: | | |
| Printed Name | Signature | Date | |
| Address | Tel | Telephone | |
| Printed Name | Signature | Date | |
| Address | Tel | Telephone | |
| Printed Name | Signature | Date | |
| Address | Te | lephone | |